

# Form CPF M 102: Campaign Finance Report

**Municipal Form** 

Office of Campaign and Political Finance

nce
2017 CL.ERKS OFFICE
2017 OCT 30 PM Commission

Fill in Reporting Period dates: Beginning Date: Jan 1.2017 Ending Date: Oct BURN, MA 67801
Type of Report: (Check one)
8th day preceding preliminary 8th day preceding election 30 day after election year-end report dissolution
Candidate Full Name (if applicable)  [sdfsifd Alderman Ward & Woburn  Office Sought and District  SDKFSOP]S 224 School St Woburn  Residential Address  E-mail: Johnny bear Degnail Com  Phone # (optional):  Alderman Bear Champ (ommittee  Augustin Kabaalu  Name of Committee Treasurer  7 Marie Ha St Woburn  Committee Mailing Address  E-mail: alderman bear Champ Degnail. (or Phone # (optional)):
SUMMARY BALANCE INFORMATION:
Line 1: Ending Balance from previous report
Line 2: Total receipts this period (page 3, line 11)  44 50, 56
Line 3: Subtotal (line 1 plus line 2)  4450.56
Line 4: Total expenditures this period (page 5, line 14)
Line 5: Ending Balance (line 3 minus line 4) 948. 7/
Line 6: Total in-kind contributions this period (page 6)
Line 7: Total (all) outstanding liabilities (page 7)
Line 8: Name of bank(s) used:
ffidavit of Committee Treasurer: certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance stivity, including all contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign nance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.  igned under the penalties of perjury:  (Treasurer's signature)  Date: 10/30//7
OR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box only)
Candidate with Committee and no activity independent of the committee  I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. I have not received any contributions, incurred any liabilities nor made any expenditures on my behalf during this reporting period.
Candidate without Committee OR Candidate with independent activity filing separate report  I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.
Date: Oct 30 2017

#### **SCHEDULE A: RECEIPTS**

M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only itemize those receipts over \$50. In addition, the occupation and employer must be reported for all persons who contribute \$200 or more in a calendar year.

(A "Schedule A: Receipts" attachment is available to complete, print and attach to this report, if additional pages are required to report all receipts. Please include your committee name and a page number on each page.)

	Name and Residential Address	Occupation & Employer	
Date Received	(alphabetical listing required)	Amount	(for contributions of \$200 or more)
=			
,			
ne 9: Total Recei	pts over \$50 (or listed above)		
ine 10: Total Receipts \$50 and under* (not listed above)			
ne 11: TOTAL R	ECEIPTS IN THE PERIOD		← Enter on page 1, line 2

<sup>\*</sup> If you have itemized receipts of \$50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.

## **SCHEDULE A: RECEIPTS (continued)**

Date Received Name and Residential Address (alphabetical listing required)		Amount	Occupation & Employer (for contributions of \$200 or more)		
9-23	B& B Catering				
7-28	John Beauchaf 224 School st	750	Teacher Baston Pschas Loan		
8-11	John Beauchor 224 School It	937.25	Teacher BPS Candidut Loan		
8-19	John Beauch 8 224 School St	413,31	Teachen BPS Loan		
8-28	John Beaucry 224 School +	1500	Teachen BPS Loan		
9-16	Dwyen-7 Wymout	100			
9-19	Ken Summers 6B Bartlett	100			
9-25	Carol Erven	100			
10-19	Anne Beauchy 1 Marietta It Web	500	Retired		
10-19	Harry Sweet	50			
,					
Line 9: Total Receip	pts over \$50 (or listed above)	4400,56			
Line 10: Total Recei	ipts \$50 and under* (not listed above)	50			
Line 11: TOTAL RECEIPTS IN THE PERIOD  ↓↓↓∫ o . S 6  Enter on page 1, line 2  * If you have itemized receipts of \$50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.					

If you have itemized receipts of \$50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.

#### SCHEDULE B: EXPENDITURES

M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period. Committees must keep detailed accounts and records of all expenditures, but need only itemize those over \$50. Expenditures \$50 and under may be added together, from committee records, and reported on line 13.

(A "Schedule B: Expenditures" attachment is available to complete, print and attach to this report, if additional pages are required to

report all expenditures. Please include your committee name and a page number on each page.)

report all expenditures. Please include your committee name and a page number on each page.)						
Data Data	To Whom Paid					
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount		
8-23	Bé B Caterins	12 3rd Row Woburn	Catering Services	500		
9-23	Boston Creatice Design	Wilming ton MA	Printing	207.81		
9-21	market Bwilt	woburn mall	Food	197.98		
9-23	Music & Mem 33 Forest Park Rd	33 Forest Park ROHO	Entertainment	250		
9-14	USPS	Washington St Woburn	Postage	245		
7-28	Wobern Printing	Everett St Wobura	Printing	750		
8-11	Wolson Printing	Everett St Wobvan	Printing	937.75		
8-19	Woburn Printing	Everet St Wabura	Printing	413.31		
8-28						
<u> </u>	,	Line 12: Total Expenditures ove	er \$50 (or listed above)	3501.85		
Line 13: Total Expenditures \$50 and under* (not listed above)						
Enter on page 1, line 4 → Line 14: TOTAL EXPENDITURES IN THE PERIOD 3501.85				3501.85		

<sup>\*</sup> If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

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## **SCHEDULE B: EXPENDITURES (continued)**

Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount
				1
				7.8
e 9				
				9
		/		
		Line 12: Expenditures over \$50	(or listed above)	
		Line 13: Expenditures \$50 and u	nder* (not listed above)	
	Enter on page 1, line $4 \rightarrow$	Line 14: TOTAL EXPENDITU	URES IN THE PERIOD	

<sup>\*</sup> If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

### **SCHEDULE D: LIABILITIES**

M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as well as those liabilities incurred during this reporting period.

Date Incurred	To Whom Due	Address	Purpose	Amount
7-28	John Beauchyp 224 School St	224 School St Woburn	Printing 1	750
8.11.17	John Beway	224 Schoul St Woburn	Printing	937.75
8-19.17	John Becaly	24 School	Printing a	413.31
8-28-17	John Beway	234 School St Leobure	Printing &	1500
	,			
	1			
	,			
	Enter on page 1, line 7 →	Line 18: TOTAL OUTSTAND	ING LIABILITIES (ALL)	3601.06